PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/518,789			ing Date 28/2005	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
⊢	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	<u> </u>	RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1,16(a), (b), or (c))		_	N/A		N/A		N/A	1 == (4)	١	N/A	1 == (4)	
	SEARCH FEE (37 CFR 1.16(k), (f),		N/A		N/A		N/A		١	N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p),	E	N/A		N/A		N/A		1	N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =				x \$ =		OR	x s =		
IND	EPENDENT CLAIM CFR 1,16(h))	IS .	minus 3 = *			ı	x \$ =		1	x s =		
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 s	gs exceed 100 in size fee due for each in thereof. See CFR 1.16(s).								
	MULTIPLE DEPEN	NDENT CLAIM PR	7 CFR 1.16(j))				ı					
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL		
APPLICATION AS AMENDED – PART II  OTHER THAI  (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENT												
AMENDMENT	03/09/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18())	• 11	Minus	<b></b> 20	= 0		x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1,16(h))	• 1	Minus	<b></b> 3	= 0		x \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
,									OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus			l	x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(h))		Minus	***	=	1	x \$ =		OR	x s =		
	Application Size Fee (37 CFR 1.16(s))								ı			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
Γ									OR	TOTAL ADD'L FEE		
If the entry in column 1 is less than the entry in column 2, write 0" in column 3.  If the "Highest Number Pervolusy Paid For M THIS SPACE is less than 30, enter "20".  If the "Highest Number Prvolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "Highest Number Pervolusial Paid For M THIS SPACE is less than 3, enter "3".  If the "												

This collection of information is required by 37 CFR. 1.16. The information is required to obtain or retain a benefit by the public with in it is lief land by the USFTO to process) an application. Confidentiality is overwined by 80 LSC. 122 and 37 CFR. 1.14. This collection is estimated to take 12 minutes to complete, including pathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer. U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandris, VA 22313-1450.